

City of Seattle Seattle Department of Neighborhoods Bernie Matsuno, Director

SWEDISH MEDICAL CENTER CHERRY HILL CAMPUS MAJOR INSTITUTIONS MASTER PLAN CITIZEN'S ADVISORY COMMITTEE

SWEDISH MEDICAL CENTER
CHERRY HILL CAMPUS
MAJOR INSTITUTIONS
MASTER PLAN CITIZEN'S
ADVISORY COMMITTEE

Committee Members

Katie Porter, Chair

Patrick Carter

Andrew Coates

Dylan Glosecki

Maja Hadlock

Joy Jacobson

Eric J. Oliner

J. Elliot Smith

Laurel Spelman

Mark Tilbe

Jamile Mack

Swedish Medical Center Non-

management

Representative

Nicholas Richter

Committee Alternates

David Letrondo

Ex-officio Members

Steve Sheppard

Department of

Neighborhoods

Stephanie Haines

Department of

Planning and Development

Marcia Peterson

Swedish Medical Center Management

Cristina Van Valkenburgh

Seattle Department of Transportation

DRAFT Meeting Notes Meeting #13 March 20, 2014

Swedish Medical Center Swedish Cherry Hill Campus

550 17th Avenue

Swedish Cherry Hill Auditorium - A Level

Members and Alternates Present

Katie Porter Patrick Carter David Letrondo
Andrew Coates Dylan Glosecki Nicholas Richter

Laurel Spelman Maja Hadlock

Members and Alternates Present

Jamile Mack J. Elliot Smith Mark Tilbe

Eric Oliner

Ex-Officio Members Present

Steve Sheppard, DON Stephanie Haines, DPD

Marcia Peterson, SMC

Christina Van Valkenburgh, SDOT

(See sign-in sheet)

I. Welcome and Introductions

The meeting was opened by Katie Porter. Brief introductions followed.

II. Housekeeping

Ms. Porter noted that the committee received meeting minutes #9, 11, and 12 to review; meeting minutes #10 is in progress.

Ms. Porter noted that there was an ongoing discussion of possible sub-committees to review portions of the plan. Mr. Sheppard stated that after the last meeting, the committee members decided to get together as possible sub-committees and exchange ideas and get some help to formulate their positions regarding height, bulk and scale. Mr. Sheppard advised that since this process is quasi-judicial; it is best to be very conservative and be very careful concerning the public meeting law. Mr. Sheppard stated that members can get together to discuss positions, but, if more than of four or five people are present

the meeting is considered a public meeting, and would public notice. Mr. Sheppard cautioned the Committee members to inform him if they intended to meet as a small group so that he could determine if it was a formal meeting requiring notice etc. Mr. Sheppard emphasized that the State public meeting law is very strict and that it would be best to use caution. City operating procedures require ten days' notice. Mr. Sheppard also made a comment that if people decided to meet and discuss the work of the committee, exchange proposals, etc.; it is considered as a public meeting.

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III. SMC Progress on Current TMP Implementation

Ms. Porter asked Swedish for a report and update regarding the compliance and progress on the TMP (Transportation Management Plan). Marcia Peterson introduced Dr. John Henson for a brief update on the TMP.

Dr. Henson noted that he is the Vice President of Medical Affairs at Swedish. He noted that the TMP is an important tool to manage the impact of traffic around this campus. The presentation at this meeting will focus on progress to meet the b=goals and conditions contained in the current TMP. Dr. Henson then introduced Michael Moy to discuss this issue further.

Mr. Moy stated that he works for CommuteSeattle, a non-profit organization that it is a public and private partnership between King County Metro and City of Seattle. Its role is to reduce drive-alone commuting and make room for economic growth, reduce congestions and more accessibility. Swedish Cherry Hill campus brought the group along to help resolve and reduce traffic congestions around the area, parking issues, and bring the campus in compliance with their TMP. The goal of the TMP is to achieve reductions in single occupancy vehicle (SOV) use to, a 50%. Mr. Moy noted that this effort combines information from the different employee groups on campus - transit, ride share, bike resources, etc. The evaluation also combines the efforts of the various independent programs:

For the Swedish Medical group, about 488 employees have access to a transportation passport pass; this annual discounted comprehensive pass makes a huge impact on people's transportation choices. CommuteSeattle is working King County Metro to pilot a new orca pass program, for fewer than 20 employees; right now any smaller companies do not have access to this pass, and we are working with them to get access. There is currently access to free van pool parking to all tenants on this campus. Also, Swedish Cherry Hill joined the Seattle2030 District, this is a private, public partnership measuring strategy through reduce environmental impacts of buildings and operations, it is a green building program, and a great effort by different property owners, architects, designers to make downtown Seattle more environmental friendly. CommuteSeattle will host transportation events for employees in campus and a community transportation fair on April 15 at the James Tower entrance. There will be seminar on the current transportation cuts, and the Move King County Now campaign, educational fairs regarding Commuters and computers to get more transportation options and about the current technology. There will be a Bike community seminar 101, during the Bike community month, and bike to work day.

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A question was raised regarding if there would be a dedicated employee transportation coordinator and was asked if this will be a full-time job. Mr. Moy responded tht there will be such a position and that this individual is responsible for the organization of the TMP, providing reports to State and City, and to monitor their drive-alone rate.

Dylan Glosecki: asked for more details concerning the "2030 district". Mr. Moy responded that that the 2030 district is about internal benchmarking, energy, transportation, water use, idea of historical, and hospital buildings need of different kinds energy or requirements; extending resources across the districts and to have a communal target by sharing experiences and information.

Several members noted that there are many good suggestions, but that enforcement appears to be lacking. Dr. Henson responded that there are discussions underway regarding enforcement policies that will address parking in the neighborhood. Dr. Henson mentioned that he will work on how to enforce it but could not give any specific details on how it would look like.

Mr. Moy stated that CommuteSeattle will undertake research studies of the existing supply and demand and how people's behaviors are affected by this and other factors. This will include looking at the zip codes of where people live; study transit maps that is going straight to the campus; educating people about available transit services and availability.

Ms. Porter asked how often the information is updated. Mr. Moy responded that a transportation survey comes every other year. All participating groups on campus will have the same survey schedule in order to get better information.

Ms. Porter suggested using Children's as an example of best standard to which how an institution managed their parking enforcements in a residential settings. Dr. Henson responded that he is in contact with Children's and recognized that their plan works well around the neighborhood. He will be looking at best practices and see what direction Swedish will be heading. Mr. Moy also noted that he will be meeting with Sabey, Swedish and Children's.

Nicholas Richter asked Dr. Henson if a meeting took place between Swedish and the Transportation director from Children's. Dr. Henson responded they will be talking to Children's in the near future. Mr. Richter asked tht he and others be provided a date for the meeting.

IV. Presentation of the New Alternative 10

Ms. Porter introduced John Jex from Callison to present the new Alternative 10.

Mr. Jex mentioned that the new Alternative 10 is an attempt to create less impact in the neighborhood and provide additional mitigation in bulk and scale issues through increase setback, and reduced heights. Mr. Jex also mentioned about additional information regarding the shadow studies that were requested in the previous meetings that will be available in addition to alternatives 8, 9 and 10. Mr. Jex commented that the alternatives that are currently moving forward are 8, 9 and 10.

Mr. Jex stated that the biggest changes are in the 18th Avenue half block. Starting on Cherry Street on the north, the building on below will be 37 ft. at Cherry Street instead of 50 ft.; at 18th and Cherry, the site drops to approximately 30 ft. to Jefferson. The topography will be

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used to provide height mitigation along 18th and the boundary on neighbors at 19th; this will cut the building in half and a proposed separation of the building down to 15 ft. and the connectivity to the ground floor between the north and south buildings will have building entry canopies in which the features are not yet designed. Along the 50 ft. height zone that continues south to Jefferson, there will be a drop of 37 ft. There will be additional setbacks on 16th to mitigate the distance between the 200 ft. and the 160 ft. tower; the 105 ft. height on Cherry Street matches the James and East Tower.

Mr. Jex also mentioned that the average separation of houses to the construction is more than 80 ft. at the point of reference, creating a zone of privacy. There is a proposal for to do landscaping around the perimeter that is yet to be designed along the 25 ft. zone.

Mr. Jex commented that on the 16th, additional setbacks are being proposed for alternative 10 that provide stepping from the building at 37 ft., 65 ft., 105 ft., 160 ft. on the other side of the street up to 200 ft. that steps back to open the distance.

An illustration and simulation and access to the shadow studies for spring, fall, and summer was also presented.

Ms. Porter mentioned that this is the first time this committee saw and heard this presentation and it will be challenging for the committee members to comment on what is being presented. Ms. Porter also noted that this is also the first time the public saw and heard this presentation.

IV. Public Comments

The meeting was opened for public comments.

Comment from Troy Meyers: Mr. Myers commented that in response to Ms. Porter's request to provide acceptable solutions and present back to the CAC, there was not enough facts or data to make a presentation; the PDEIS was too vague. He also noted that the Squire Park Community Council had adopted two motions at their last meeting, agreeing to be the owner of legal agreements if needed from the community and to support individual community efforts as needed.

Comment from Ellen Sollod: M.s Sollod encourage the CAC to look more closely at the Children's MIMP as an example in order to recognize that this is a low rise, residential neighborhood. At Children's, the height limit is 125 ft., the MIO is 160 ft., that has been agreed upon and in addition, all the boundaries that are adjacent to residential are at 37 ft. with extensive setbacks, and the development does not exceed 2.1 million sq. ft. She stated that she was still waiting for the new PDEIS that the CAC requested, and would like to see additional alternatives that further reduce height. bulk and scale to less than shown in; alternative 10 which is still too large.

Comments from Bob Cooper: Mr. Cooper commented that that target keeps moving and he does not know exactly what is on or off the table. The proposal still shows an expansion. By looking at the two alternatives, Mr. Cooper agrees with Ms. Sollod that it is packing too much property in too little space and it is completely out of proportion. In addition it is not clear if this new alternative includes additional height for the rehab/kidney center; it needs to spread further.

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Comments from Jerry Matsui: Mr. Matsui stated that Alternative 10 is still an abomination and is no better, but even worse, than previous alternatives. It is the same configuration; if you try to mitigate by putting in vegetation, it is totally unacceptable. Any ultimately acceptable plan will need to be lower and further setback from the property line.

Comment from Chris Genese: There are a lot of different desires from this process; it needs to slow down, the community needs to come together and figure out what the community wants.

Comment from Aleta Van Patten: Ms. Van Patton stated that she needs to see the PDEIS because majority of the decision will be based on it. In addition there needs to be want more open space, bigger setbacks, less height and more functions placed. Swedish needs to come up with options that are more palatable for the community.

Comment from Sandy (last name not given): The commenter stated tht she was stunned. as being part of the neighborhood. These are very tall buildings in a residential neighborhood that have a tremendous impact on the shadow studies. She concurred with others that 8th Avenue needs to be broken up into smaller units of buildings and appreciated the comments about what Children's has done.

Comment from Craig (last name not given) The commenter noted that like to go the SOV goal in the current TMP is to reduce SOV use from 58 to 50%. He stated that he believes that Swedish Medical Center can do better than that. He further stated that he was surprised to hear that patient's gets free parking.

Comment from Abel Bradshaw: Ms. Bradshaw stated that in the shadow studies; her entire house is under a shadow. That will have a tremendous impact on trees, gardens, in the neighborhood. The plan needs to pay attention that people's backyard, and how they will be impacted by these shadows.

Comment from Julie Popper Ms. Popper noted that she was with SEUI Healthcare 1199 Northwest that represents union workers at Swedish Cherry Hill. The members were warned that cardio and neuro are moving to First Hill as well as acute care. If they are moving, why does Swedish need to build this building? Is this really for Swedish or just to service Sabey to manage more property? She emphasized that the MIMP is for Swedish, which is a local community hospital, and it is not for either Providence or for Sabey.

V. Continued Discussion of the EIS

Stephanie Haines was introduced to discuss the Environmental Impact Statement (EIS). The MIMP process is very detailed and requires a cycle of reviews. There will be plenty of opportunities for public comments once the draft is published. Ms. Haines mentioned that there is a schedule and the draft is set to publish on May 22nd.

Katy Chaney from URS summarized the upcoming schedule with regards to the draft EIS. The draft EIS and draft MP will be published on May 22^{nd} ; there will be 45 day comment period. There will be a public meeting tentatively scheduled on June 12^{th} , the public are welcome to bring their comments. The public can submit written comments to be considered in the EIS. There will be preparation and the final EIS and final MP will be available sometime in October; at that time, the CAC and the City of Seattle will develop their own recommendations.

VI. General Committee Discussion

Brief general discussion ensued. Members noted that they needed more time to consider alternative 10 before having a meaningful discussion. Members determined that a follow on extra meeting would be needed to develop comments to Alternative 10 and suggested April 10^{th} from that date. Members agreed

Ms. Porter asked if there is a response with regards from the SEIU comments about the move of cardio and neuro to First Hill. Ms. Peterson noted the decentralization is being discussed. Various programs and services may be moved around, but there has been no proposal to remove either of the major proposed programs from the Cherry Hill Campus.

Nicholas Richter stated that the reduced heights over the non-Swedish owned parcels in the western portion of the campus is a major missed opportunity that should be re-considered. Dave Letrondo asked why greater height there is more appropriate. Mr. Richter responded that it is adjacent to Seattle University. Other members agreed that this should be considered. Patrick Carter noted tht some neighbors raised a question about excavating below ground to achieve square footage goals. She asked if this was possible.

Mr. Sheppard responded underground space is not counted when determining wither floor area ration or total square footage of development; When the Committee looks at the bulk and height it is the areas above ground.

Mr. Jex clarified that the campus has significant square footage underground; the proposals under these alternatives continues that approach; there are codes that prohibits some hospital functions underground.

Ms. Haines made a comment that here are two measurements in the Master Plan that is being used: 1) gross sq. footage; how much sq. ft. are the institution is putting on this campus; this is used to measure parking, and traffic studies, whether it is above or below ground; 2) floor area ratio, for the site, this is looking at the bulk, and how much sq. footage is above ground as it relates to the property

Ms. Porter thanked Swedish, Callison, and Sabey for introducing another alternative; this shows their effort and willingness to get closer to meet the needs of the community.

VII. Adjournment

No further business being before the Committee, the meeting was adjourned.